



Government of the Northwest Territories
 Department of Justice
 Witness Expense Assistance
EXPENSE CLAIM

Form WEA 3

This form is to be completed by the witness following the completion of travel or when no more expenses will be incurred.

Name of Accused: _____

Witness for: Prosecution

Defence

Name of Lawyer: _____

Court date: _____

Court Location:
(Community) _____

WITNESS INFORMATION <i>(Payments will be made directly to the witness)</i>		
First Name	Middle Name	Last Name
Complete Mailing address		
City/Town	Province/Territory	Postal Code
Phone numbers	Home	Business

TRANSPORTATION	<i>Did you personally pay for transportation costs? If yes, how did you travel? (Attach original receipts and a detailed itinerary.) If no, continue to meals.</i>	
<input type="checkbox"/> Private vehicle	<input type="checkbox"/> Aircraft	<input type="checkbox"/> Other _____
<i>Complete only if you traveled by private vehicle.</i>		
Left home at _____ <i>(Insert time and date)</i>	Returned home at _____ <i>(Insert time and date)</i>	Total distance traveled _____ kms

MEALS	<i>Did you personally pay for meals? If yes, how many did you pay for? If no, continue to accommodation</i>		
_____	Number of Breakfasts	_____	Number of Lunches
_____	Number of Dinners	_____	Number of Dinners

ACCOMMODATION <i>(Complete only if you personally paid for this expense or if you stayed in private accommodations)</i>	
Overnight Accommodation: <i>(# of nights)</i>	Accommodation Type:
_____	Commercial <i>(Original receipts required!)</i>
_____	Private <i>(Attach a signed note from an adult who regularly resides in the residence which includes your name, the dates that you stayed there and their phone number)</i>

Comments: _____

I hereby certify that the above information is true and accurate to the best of my knowledge.

Signature of the Witness

Date

AUTHORIZATION <i>(for office use only)</i>	
This witness expense claim is:	
<input type="checkbox"/> Approved for payment in the amount of	\$ _____
<input type="checkbox"/> Partially approved for payment in the amount of	\$ _____
<input type="checkbox"/> Not approved	
Authorized by	Date

If you require assistance, please contact the Finance Division of the NWT Department of Justice toll free at 1 (866) 311-1152
 Please allow 4 weeks for processing. Payments will be mailed.